

# Specialty Lines

## UNDERWRITERS

1233 North Mayfair Road, Suite 208 • Milwaukee, WI 53226  
Phone: 414-778-3560 • Fax: 414-778-3598

### SEEDSMENS SUPPLEMENTAL APPLICATION

- 1) Of which Seed Trade Association(s) is the applicant a member in good standing? F.I.S. \_\_\_\_\_ Other(s) \_\_\_\_\_
- 2) Is the Firm a co-operative, or a member of a co-operative? YES( ) NO( )
- 3) Does the firm research or develop transgenic seed varieties? YES( ) NO( )

If "Yes", are new transgenic seed varieties tests grown for a minimum of 2 growing seasons before being marketed? YES ( ) NO( ) If "No", please explain procedures to ensure the transgenic seed variety is of the required quality and has the required characteristics. \_\_\_\_\_  
\_\_\_\_\_

- 4) Do you use a standard disclaimer and/or limited remedy clause on all your seed tags, bags, labels and invoices, limiting your liability to replacement, or the cost of replacement, seed? YES( ) NO( )  
If "No", please explain \_\_\_\_\_
- 5) Please list main types of seeds:  
Agricultural: \_\_\_\_\_  
Vegetable: \_\_\_\_\_
- 6) Please list countries to which you export seed: \_\_\_\_\_  
\_\_\_\_\_
- 7) Please give the approximate percentage of your sales from:  
a) Seed grown by you, or by others for you: \_\_\_\_\_ %  
b) Treating/Conditioning seed for others: \_\_\_\_\_ %  
c) Distribution of seed grown by others and Sold under their label: \_\_\_\_\_ %
- 8) Do you deal in green bean seeds YES( ) NO( )  
If "Yes", advise the source of green bean seeds (advise if seeds were exposed to halo blight and eradication measures taken): \_\_\_\_\_  
\_\_\_\_\_
- Do you deal in watermelon seeds? YES( ) NO( )  
If "Yes", please advise the measures taken against watermelon fruit blotch: \_\_\_\_\_  
\_\_\_\_\_
- Do you deal in potato seeds? YES( ) NO( )  
If "Yes", please describe your quality control measures: \_\_\_\_\_  
\_\_\_\_\_

- 9) Do you comply with:
- a) FIS Guidelines on the prevention and handling of claims in the seed industry? YES( ) NO( )
  - b) Internationally accepted procedures for seed testing such as AWSA or ISTA? YES( ) NO( )
  - c) Have you initiated an ISO 9000 Program? YES( ) NO( )
- 10) In testing and checking seeds, does the firm maintain a private laboratory staffed with a senior analyst? YES( ) NO( )

If "No", does the firm use the facilities of a qualified commercial laboratory? (Please provide name of laboratory used)

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IT IS UNDERSTOOD AND AGREED THAT THIS SUPPLEMENTAL APPLICATION SHALL BECOME A PART OF THE APPLICATION FOR PROFESSIONAL LIABILITY ERRORS & OMISSIONS INSURANCE.

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Date

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Name of Applicant

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Signature of person authorized to execute on behalf of the Applicant